

County: Winnebago

Facility ID: 9510

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PARK VIEW HEALTH CARE-PLEASANT ACRES

725 BUTLER AVENUE, P.O. BOX 10

WINNEBAGO 54985 Phone:(920) 235-5100

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 115

Total Licensed Bed Capacity (12/31/03): 115

Number of Residents on 12/31/03: 115

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 112

County

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		19.1
Supp. Home Care-Personal Care	No					1 - 4 Years		41.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.1	More Than 4 Years		22.6
Day Services	No	Mental Illness (Org./Psy)	36.5	65 - 74	7.8			-----
Respite Care	No	Mental Illness (Other)	2.6	75 - 84	34.8			83.5
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	41.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.7	95 & Over	9.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	7.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	12.2	65 & Over	93.9	-----		
Transportation	No	Cerebrovascular	5.2		-----	RNs		14.5
Referral Service	No	Diabetes	6.1	Gender	%	LPNs		3.3
Other Services	Yes	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	28.7	Male	23.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	76.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	1.1	139	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9
Skilled Care	12	100.0	295	82	94.3	119	0	0.0	0	16	100.0	155	0	0.0	0	0	0.0	0	110	95.7
Intermediate	---	---	---	4	4.6	98	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	3.5
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	12	100.0		87	100.0		0	0.0		16	100.0		0	0.0		0	0.0		115	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	3.2	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	3.2	Bathing	1.7	70.4	27.8	115
Other Nursing Homes	8.5	Dressing	22.6	55.7	21.7	115
Acute Care Hospitals	83.0	Transferring	30.4	53.9	15.7	115
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	28.7	51.3	20.0	115
Rehabilitation Hospitals	0.0	Eating	68.7	15.7	15.7	115
Other Locations	2.1	*****				
Total Number of Admissions	94	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	9.6	Receiving Respiratory Care		13.0
Private Home/No Home Health	19.3	Occ/Freq. Incontinent of Bladder	41.7	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	4.5	Occ/Freq. Incontinent of Bowel	32.2	Receiving Suctioning		0.0
Other Nursing Homes	12.5			Receiving Ostomy Care		3.5
Acute Care Hospitals	8.0	Mobility		Receiving Tube Feeding		2.6
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.9	Receiving Mechanically Altered Diets		33.9
Rehabilitation Hospitals	0.0					
Other Locations	5.7	Skin Care		Other Resident Characteristics		
Deaths	50.0	With Pressure Sores	4.3	Have Advance Directives		69.6
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	88			Receiving Psychoactive Drugs		63.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer %	Group Ratio	Bed Size: 100-199 Peer %	Group Ratio	Licensure: Skilled Peer %	Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.4	87.8	1.11	87.6	1.11	88.1	1.11	87.4	1.11
Current Residents from In-County	93.9	86.6	1.08	83.0	1.13	82.1	1.14	76.7	1.22
Admissions from In-County, Still Residing	38.3	34.3	1.12	19.7	1.95	20.1	1.90	19.6	1.95
Admissions/Average Daily Census	83.9	71.2	1.18	167.5	0.50	155.7	0.54	141.3	0.59
Discharges/Average Daily Census	78.6	73.5	1.07	166.1	0.47	155.1	0.51	142.5	0.55
Discharges To Private Residence/Average Daily Census	18.8	24.3	0.77	72.1	0.26	68.7	0.27	61.6	0.30
Residents Receiving Skilled Care	96.5	89.5	1.08	94.9	1.02	94.0	1.03	88.1	1.10
Residents Aged 65 and Older	93.9	84.0	1.12	91.4	1.03	92.0	1.02	87.8	1.07
Title 19 (Medicaid) Funded Residents	75.7	74.5	1.01	62.7	1.21	61.7	1.23	65.9	1.15
Private Pay Funded Residents	13.9	17.8	0.78	21.5	0.65	23.7	0.59	21.0	0.66
Developmentally Disabled Residents	0.0	2.8	0.00	0.8	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	39.1	55.2	0.71	36.1	1.09	35.8	1.09	33.6	1.16
General Medical Service Residents	28.7	17.5	1.64	22.8	1.26	23.1	1.24	20.6	1.40
Impaired ADL (Mean)	45.0	49.3	0.91	50.0	0.90	49.5	0.91	49.4	0.91
Psychological Problems	63.5	68.8	0.92	56.8	1.12	58.2	1.09	57.4	1.11
Nursing Care Required (Mean)	7.2	7.4	0.97	7.1	1.01	6.9	1.04	7.3	0.98